

CHANGE OF ADDRESS FORM

Address change for CPA/PA Firm (corporation, partnership) Applicant NAME OF CPA/PA OR APPLICANT FOR LICENSURE License No. Last First Middle **FIRM** principal to Type Corporation Partnership Fictitious name License No. complete firm address change. Firm name Your title **NEW ADDRESS OF RECORD** (required) If you are a licensed CPA/PA Home Business or firm, your address of record is **Business name** (If applicable) public information, Street Unit/apt.# will be sent to this ZIP City State **FORMER ADDRESS OF RECORD** *If your address Unit/apt.# Street of record is a P.O. ZIP City State you are required to provide a street ALTERNATE ADDRESS* FOR MAIL DROPS AND P.O. BOXES will **not** be posted Street Unit/apt. # on CBA's online License Lookup. ZIP City **State CONTACT INFORMATION Email address** Phone number I certify the truth Print your name **Date** and accuracy of all these statements and **Signature** (form must be signed)

A licensee who fails to notify the California Board of Accountancy within 30 days of a change of address of record may be subject to citation and fine (fines ranging from \$100-\$1,000) under the California Code of Regulations, title 16, division 1, sections 3, 95 and 95.2.

DEPARTMENT OF CONSUMER AFFAIRS

representations.



Revised: 5/19 PDE_19-169

The CBA maintains a list of all licensees. This list is sold to requestors for mailing list purposes. Check here if you do not want your name included on this list. Please note: Your name and address of record is public information and can be accessed through our website at www.cba.ca.gov.

This form is being provided for your convenience. Other forms of written and signed notice may be accepted by the CBA. Please allow five to seven business days for address changes to be reflected in License Lookup.

Email to: adminunit@cba.ca.gov Fax to: (916) 263-3678 **Mail to:** 2450 Venture Oaks Way, Suite 300, Sacramento, CA 95833

Contact CBA: (916) 263-3680